



Atty. Docket No.: 222085/2102

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application of: Aaron T. Timperman
 Serial No.: 10/784,352
 Filed: February 23, 2004
 Entitled: Apparatus and Method for
 Using Bi-Directional Capillary
 Electrophoresis

Examiner: Barton, Jeffrey
 Thomas

Group Art Unit: 1753

Conf. No.: 2338

CERTIFICATE OF MAILING UNDER 37 CFR 1.10

I hereby certify that the paper (and any paper or fee referred to as being enclosed) is being deposited with the United States Postal Service using Express Mail to Addressee Service, under 37 C.F.R. Section 1.10, **Express Mail Label No. EQ270459496US** on this date, February 7, 2006, postage prepaid, in an envelope addressed to Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Andrea MacVarish

Name of Person Mailing Paper

Signature of Person Mailing Paper

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

TRANSMITTAL LETTER

Enclosed for filing in the above-identified patent application, please find the following documents:

1. Response to Office Action mailed August 8, 2005;
2. Amendment Transmittal Letter (includes Petition for Extension of Time); and
3. Return Post Card.

The Commissioner for Patents is hereby authorized to charge any fees to Deposit Account No. 16-0085, Reference 222085/2102. A duplicate of this transmittal letter is enclosed for this purpose.

Respectfully submitted,

Date: February 7, 2006

Name: Ralph A. Loren
 Registration No.: 29,325
 Customer No.: 29933
 Palmer & Dodge LLP
 111 Huntington Avenue
 Boston, MA 02199-7613
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Alexandria, VA 22313-1450

AMENDMENT TRANSMITTAL LETTER

Sir:

1. Transmitted herewith is an amendment in response to the Office Action mailed on August 8, 2005 in the above-referenced patent application.

STATUS

2. Applicant is
☒ a small entity.
☐ other than small entity.

EXTENSION OF TIME

3. The proceedings herein are for a patent application and the provisions of 37 CFR 1.136 apply.

| | | | |
|-------------------------------------|---|---------------------------|------------------------|
| <input checked="" type="checkbox"/> | Applicant petitions for an extension of time under 37 CFR 1.136 | | |
| | <u>Extension</u> | <u>Fee for other than</u> | <u>Fee for</u> |
| | <u>(months)</u> | <u>small entity</u> | <u>small entity</u> |
| <input type="checkbox"/> | ONE month | \$120.00 | \$60.00 |
| <input type="checkbox"/> | TWO months | \$450.00 | \$225.00 |
| <input checked="" type="checkbox"/> | THREE months | \$1,020.00 | \$510.00 |
| <input type="checkbox"/> | FOUR months | \$1,590.00 | \$795.00 |
| <input type="checkbox"/> | FIVE months | \$2,160.00 | \$1,080.00 |
| | | Fee | <u>\$510.00</u> |

If an additional extension of time is required, please consider this a petition therefor.

02/09/2006 SHASSEN1 00000034 160085 10784352

01 FC:2253 510.00 DA

- (a) ☐ An extension for _____ has already been secured and the fee paid therefor of \$ _____ is deducted from the total fee due for the total months of extension now requested.

Extension fee due with this request **\$510.00**

OR

- (b) ☐ Applicant believes that no extension of time is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition for extension of time.

FEE FOR CLAIMS

4. The fee for claims (37 CFR 1.16(b)-(d)) has been calculated as shown below:

| CLAIMS AS AMENDED | | | | | | |
|---|---|-------|---|----------------------------|---------|-----|
| | (1) | (2) | (3) | | | |
| | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT NUMBER EXTRA | RATE | FEE |
| TOTAL CLAIMS | 15 | minus | 42 | 0 | x \$50 | 0 |
| INDEPENDENT CLAIMS | 2 | minus | 4 | 0 | x \$200 | 0 |
| MULTIPLE DEPENDENT CLAIM ADDED | no | | | | \$360 | 0 |
| | | | | TOTAL | | 0 |
| If applicant has small entity status under 37 CFR 1.9 and 1.27, then divide total fee by 2 and enter amount here. | | | | SMALL ENTITY TOTAL | | 0 |

- (c) ☒ No additional fee for claims is required.

OR

- (d) ☐ Total additional fee for claims required \$ _____

FEE PAYMENT

5. ☐ Attached is a check in the sum of \$ _____

- ☒ Charge the amount of \$510.00 to Deposit Account No. 16-0085, Reference No. 222085/2102 and any additional necessary fees. A duplicate of this transmittal is attached.

Respectfully submitted,

Date: February 7, 2006



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